

CHANGE OF ACCOUNT OWNER

Current account owner:	
PACT account number:	
PACT beneficiary:	
New account owner:	
New account owner signature	:
SSN:	
Address:	
Daytime phone number:	
	ed please attach a copy of the death certificate and a copy of the appropriate pages from the will giving evidence of appointment as
documentation I have presented that submission of this informatic	information I have provided on this form is true and correct and that all is either the original or an unaltered copy of the original. I understand in and this certification are treated as made under oath by law and Ala. Code, § 13A-10-100(a)(3) and § 13A-10-102.)
Current owner's signature:	
Print name:	
Date:	
Daytime phone number:	
Please complete this form and	d remit a \$20.00 processing fee to the PACT office.